

**American
Academy of
Pediatrics**



OFFICERS

President

Robert W. Zavoski, M.D.
Hartford, CT

President-Elect

Ronald Angoff, M.D.
New Haven, CT

Treasurer

Leo J. DiStefano, M.D.
West Hartford, CT

Secretary

Sandra Carbonari, M.D.
Waterbury, CT

Immediate Past President

Jeanne M. Marconi, M.D.
Norwalk, CT

MEMBERS-AT-LARGE

Douglas Idelson, M.D.
New Haven, CT

Carol Leicher, M.D.
Hartford, CT

Cliff O'Callahan, M.D.
Middletown, CT

James E. O'Connor, M.D.
Cheshire, CT

Leonard I. Banco, M.D.
Hartford, CT

Elsa L. Stone, M.D.
North Haven, CT

GOVERNMENT RELATIONS-LOBBYIST

Judith A. Blei, J.D.

EXECUTIVE DIRECTOR

Jillian G. Wood

HEZEKIAH BEARDSLEY CONNECTICUT CHAPTER

104 HUNGERFORD STREET • HARTFORD, CT 06106 • TEL. (860) 525-9738 • FAX (860) 727-9863

My name is Dr. Casey Braitsch, MD, MPH and I am a pediatric resident at Yale New Haven Children's Hospital here to provide testimony on Proposed Bill #686 requiring all restaurant chains of more than 10 restaurants to provide nutritional information to their customers. The American Academy of Pediatrics, CT chapter, believes this is an important piece of legislative action designed to empower our citizens to make active choices in their health.

The problem of obesity in America is no longer limited to the adult population. The CDC estimates that in the United States from 1963 to 2002, rates of child and adolescent obesity tripled, to now over 9 million obese children. Rates of obesity-related illness are not lagging behind. For example, at current rates of obesity, the lifetime risk of a girl being diagnosed with type 2 diabetes (formerly known as adult-onset) is 40%; that of boys is 30%. We can expect a similar increase in the rates of cardiovascular disease, cancers, liver disease, orthopedic problems and other obesity-related illness as these children age into adulthood. As reported in the Archives of Pediatrics this January, the differential increase in healthcare cost of obese children compared to their healthy weight peers is \$172 per year.

Parents today are therefore faced with enormous responsibility. From unhealthy school lunches to cuts in school gym programs, direct to children food advertising to misleading ad campaigns, the burden of making food choices rests on parents in an environment seemingly designed to make children obese. So, what decisions are they making? The National Restaurant Association estimates that adults and children eat 1/3 of their calories in restaurants. Fast food encompasses a large portion of that number and is widely acknowledged to be the leader in calorie-dense food. This may lead us to believe that parents and children don't care about what they eat, and knowingly make these unhealthy decisions. However, international studies show that 9 out of 10 consumers in Europe and North America are unable to provide an estimate of their recommended daily caloric intake. And, in a study by the American Dietetic Association, people reported that obstacles to achieving a healthy diet were lack of time in 38% and lack of understanding of nutritional guidelines in 29%. Is this a chosen apathy? Research suggests not. The Center for Science in the Public interest reports that 3/4 of shoppers read nutrition labels. Those who do are more likely to have a diet lower in fat and cholesterol and higher in Vitamin C.

Lack of time and lack of understanding of nutritional guidelines would both be addressed by providing consumers with nutritional information at chain restaurants. Parents and children would be able to look at a menu board and understand that while the "new smoothie" or "new salad with chicken, cheese, etc..." appears more healthful than the chicken filet, it in actuality isn't. They would be able to understand that eating twice a day at fast food restaurants may cause them to double their recommended daily intake of calories. Most importantly, parents would be able to actually make an informed decision regarding their children's intake of calories and fat, rather than relying upon often misleading advertising campaigns.

The children and parents I see in my clinic are reliant on Medicaid. Some are uninsured and many are unemployed. Many are also obese. They lack the resources to have stable access to safe places to exercise and feel financially limited to make healthful decisions about their diet. They do, however, express a wish to make better choices and are often surprised at the information they receive. While education of the public on obesity and its health effects will require continued effort on the part of schools, the health sector, government and individuals, we must continue to allow industry to do its part in providing truthful information on the product it is offering. This is no more than we have been requiring of business since the cigarette companies were exposed for false and subversive advertising. The estimated cost of evaluating an entire 80-item menu for a fast-food chain is \$18,000, or \$10 per restaurant for a chain the size of Denny's (Center for Science in the Public Interest). It is clear that this is not an unreasonable contribution for business to make for the benefit of the public's health and decision-making power.

I will conclude by reminding you all of the detrimental health effects of childhood obesity and the frightening rises already seen in type 2 diabetes in particular.

Preventing the spread of this epidemic is reflective of our ability to care for our most vulnerable population. Parents need allies in this process, and today we have an opportunity to be that valuable ally. Please, enable them to choose and teach their children to choose, health.